Page 16 V07, 04947

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMBER
Kevin Burton	CV-07-4967 PJH (PR)
DEFENDANT	TYPE OF PROCESS
California Department of Corrections, et al.	Summons Order and Complaint
SERVE MTA Cauntay	CRIPTION OF PROPERTY TO SEIZE OF CONDEMY
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	Alio -
Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960	AUG 1 2 2708
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Kevin Burton, C-38062 R.J. Donovan State Prison P.O. Box 779007	Number of parties to be served in this case 3 THCHARD W. WIEKING CLERK, U.S. DISTRICT COURT NUMBER OF CALIFORN 19
San Diego, CA 92179	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SER All Telephone Numbers, and Estimated Times Available for Service):	
<u>id</u>	NORTH OF
	CALIFIC SIME
E PLAINTIFF	ELEPHONE NUMBER 415-522-2000 T WRITE BELOW THIS LINE
	T WRITE BELOW THIS LANE Extend USMS Deputy or Clerk Date 4/34/08
I hereby certify and return that I have personally served, have legal evidence of service, have e on the individual, company, corporation, etc., at the address shown above on the on the individual, company	xecuted as shown in "Remarks", the process described sy, corporation, etc. shown at the address inserted below.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named a	above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendants usual place of abode
Address (complete only different than shown above)	Date Time am pm
	Signature of U.S. Marshal or Deputy
Service Fee Total Mileage Charges including endeavors) Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
y or	\$0.00
1/3/08- Model Se with 299 Form	

- I. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
- 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: MTA Cauntay	Civil Action, File Number CV07-04967 PJH (PR)			
Salinas Valley State Prison P.O. Box 1020	Kevin Burton			
Soledad, CA 93960-1020	ν.			
	California Department of Corrections, et al			
	•			
The enclosed summons and complaint are served pursuan California State law.	t to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and			
You MUST COMPLETE the acknowledgment part of this within 20 days. An envelope has been enclosed for this purp	s form below, AND RETURN COPIES II AND 2 to the sender pose. Keep copy 3 for your records.			
corporation, unincorporated association (including a partners	MENT ON ALL COPIES. If you are served on behalf of a hip), or other entity, you must indicate under your signature you her person and you are authorized to reserve process, you must			
	orm to the sender within 20 days, you (or the party on whose enses incurred in serving a summons and complaint in any other			
If you do complete and return copies 1 and 2 of this form, answer the complaint within 20 days for private defendants a judgment by default will be taken against you for the relief default will be taken against your for the relief default will be taken against your for the relief default will be taken against your for the relief default will be taken against your for the relief				
I declare, under penalty of perjury, that this Notice and Ac was mailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail			
1/3/88 Date of Stanature	Jos Falerica Roche U.S. Mary J.			
Date of Signature	Lesto wil Clar			
ACKNOWLEDGMENT OF RECEIF	PT OF SUMMONS AND COMPLAINT			
	of the summons and of the complaint in the above captioned			
STATE OF CALIFORNIA OFFICE OF THE ALIGNMENT Y OF MERIND. Street Number and Street Name of Y.OF MERIND. DEPARTMENT OF JUSTICE 455 GOLDEN GATE AVENUE, SUITE 11000 City, State and Zin Coaco, CA 94102-3664	Attorney for Defendant Cauntay Relationship to Entity/Authority to Receive Mail Service of Process			
San John	8/05/08			
Signature	Date of Signature			

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service Copy 3 - Addressee

Copy 4 - USMS District Suspense

Document 15

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF					COURT CASE NUM	
Kevin Burton	<u> </u>		<u> </u>		CV-07-4967 РЛ	I (PR)
DEFENDANT					TYPE OF PROCESS	
California Department of Corre	ctions, et al.		<u> </u>		Summons Order	and Complaint
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	or RFD, Apartment No.,			٠.	•	Allo -
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Kevin Burton, C-380	062				NORTHE	AN DISTRICT COURT
R.J. Donovan State I P.O. Box 779007		. :			nber of parties to be ed in this case	RN DISTRICT COURT RN DISTRICT OF CALIFORM 19
San Diego, CA 9217	9			Che	ck for service	
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Signature of Attorney other Originator r	equesting service on be	half of:	PLAINTIFF	TELEPHO	ONE NUMBER	DATE
Felicia Relob	Tollick	I all	DEFENDANT	415-5	22-2000	6/10/07
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I acknowledge receipt for the total Tumber of process indicated.	otal Process District o	f District to Serve	Signature of Author	rized USI	MS Deputy or Clerk	Date
(Sign only for USM 285 if more		/ //	M La	_		1/20/6
than one USM 285 is submitted)	No	No	TI	-		9700
I hereby certify and return that I have on the individual, company, corporation	ve personally served, , , etc., at the address sho	have legal evidend own above on the or	ce of service, D have the individual, compa	executed any, corp	l as shown in "Remar oration, etc. shown at	ks", the process described the address inserted below.
I hereby certify and return that I am	unable to locate the inc	lividual, company.	corporation, etc. named	above (See remarks below)	
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HOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

Salinas Valley State Prison P.O. Box 1020 Soledad, CA 93960-1020 Kevin Burton	ction, File Number CV07-04967 PJH (PR)	
	Kevin Burton	
	ν.	
California Department of Corrections,	alifornia Department of Corrections, et al	

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES AND 2 to the separate within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

7/3/08 Date/of Signature

Signature (USMS Official)

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

STATE OF CALIFORNIA

OFFICE OF THE ATTORNEY GENERAL

Street Number and Simet Name of BUS BOX BIO.

455 GOLDEN GATE AVENUE, SUITE 11000

City, State and Zip Code

Signature

Attorney for Defendant Contreras
Relationship to Entity/Authority to Receive
Mail
Service of Process
8/05/08
Date of Signature

Copy 1 - Clerk of Court

Copy 2 - United States Marshals Service

Copy 3 - Addressee

Copy 4 - USMS District Suspense

Case 3:07-cv-04967-PJH Document 15

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

SS RECEIPT AND RETURN

PLAINTIFF Kevin Burton	AUG	G 1 2 2008	COURT CASE NUME CV-07-4967 PJH	
DEFENDANT		ARD W. WIEKING	TYPE OF PROCESS	
California Department of Corrections, e	RICHA		G 0 1	nd Complaint
	CLEHK, U	S. DISTRICT OF CALIFORNIA		
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SERVE MIKE EVANS, W	iarden		<u>: </u>	
***	partment No., City, State and ZIP (
Salinas Valley State Pris	on, P.O. Box 1020, Soledad	i, CA 93960		<u> </u>
SEND NOTICE OF SERVICE COPY TO REQU	ESTER AT NAME AND ADDRE	. 140	umber of process to be rved with this Form 285	3
Kevin Burton, C-38062 R.J. Donovan State Prison P.O. Box 779007			umber of parties to be rved in this case	19
San Diego, CA 92179			neck for service U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFO		IN EXPEDITING SERVICE	(Include Business and	
All Telephone Numbers, and Estimated Times A	(vailable for Service):			
<u>d</u>			, -	유료 불 병
				为气 。
				일을 목 종
Signature of Attorney other Originator requesting	service on behalf of:	PLAINTIFF TELEP	HONE NUMBER	
Felicia Reloba	Vicia holker -		522-2000	1
SPACE BELOW FOR USE O	F U.S. MARSHAL O	· · · · · · · · · · · · · · · · · · ·		
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	SS District of Origin Serve No	Signature of Authorized U	SMS Deputy or Clerk	Date /2 /2 8
I hereby certify and return that I have persona on the individual, company, corporation, etc., at t	lly served, have legal evidence he address shown above on the on	e of service, have execut the individual, company, co	ed as shown in "Remarks poration, etc. shown at the	s", the process described ne address inserted below.
☐ I hereby certify and return that I am unable to	locate the individual, company, c	orporation, etc. named above	(See remarks below)	
Name and title of individual served (if not shown	above)	- Marquillean	A person of suit	able age and discretion
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USMS RECORD
 NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO: Mike Evans, Warden	Civil Action, File Number CV07-04967 PJH (PR)					
Salinas Valley State Prison	Kevin Burton					
P.O. Box 1020 Soledad, CA 93960-1020	V.					
Soledad, CA 93900-1020	California Department of Corrections, et al					
	t to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and					
California State law.	SHOW THE SHO					
You MUST COMPLETE the acknowledgment part of this	s form below, AND RETURN COPIES DAND 2 10 the sender					
within 20 days. An envelope has been enclosed for this purp	pose. Keep copy 3 for your records.					
YOU MUST SIGN AND DATE THE ACKNOWLEDGE	MENT ON ALL COPIES. If you are served on behalf of a					
corporation, unincorporated association (including a partners	hip), or other entity, you must indicate mider your signature your					
relationship to that entity. If you are served on behalf of another	her person and you are authorized to receive process, you must					
indicate under your signature your authority.	→ •••• ••• ••• ••• ••• ••• ••• ••• •••					
If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose						
	enses incurred in serving a summons and complaint in any other					
manner permitted by law.						
	you (or the party on whose behalf you are being served) must					
answer the complaint within 20 days for private defendants a judgment by default will be taken against you for the relief default.						
judgment by default will be taken against you for the rener do	emanded in the complaint.					
	knowledgment of Receipt of Summons and Complaint By Mail					
was mailed on this date.						
1/3/08 for Federico Kocho, U.S. Marshel						
Date of Signature	Signature (USMS Official) P()					
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ACKNOWI EDGMENT OF RECEI	PT OF SUMMONS AND COMPLAINT					
mannar at	of the summons and of the complaint in the above captioned					
STATE OF CALIFORNIA						
OFFICE OF THE ATTORNEY GENERAL	Attorney for Defendant Evans					
Street Number and Street Name of Supply 1900	Relationship to Entity/Authority to Receive					
SAN FRANCISCO, CA 94102-3664	Mail					
City State and Zip Code	City. State and Zip Code Service of Process					
Si Juli	8/05/08					
Signature Date of Signature						

Copy 1 - Clerk of Court Copy 2 - United States Marshals Service Copy 3 - Addressee Copy 4 - USMS District Suspense

Case 3:07-cv-04967-PJH Document 15 Filed 08/12/20 USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

DI ADVENTE	COURT CLOSE N	TH COED
PLAINTIFF Kevin Burton	COURT CASE N CV-07-4967 P	
DEFENDANT	TYPE OF PROCE	
	1	er and Complaint
California Department of Corrections, et al.		
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR D	ESCRIPTION OF PROPERT	Y TO SEIZE OR CONDEMN
SERVE LIEUTENANT KRENKE	<u> </u>	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
Salinas Valley State Prison, P.O. Box 1020, Soledad, CA 93960		AUG 1 2 2008
END NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to l	
	served with this Form	105 HOLHADD W
Warrier Providence C 390/2	NO.	CLERK, U.S. DISTRICT COURT
Kevin Burton, C-38062 R.J. Donovan State Prison	Number of parties to b	RTHERN DISTRICT OF CALIFOR
P.O. Box 779007	served in this case	19
San Diego, CA 92179	Check for service	
	on U.S.A.	8 8
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gnature of Attorney other Originator requesting service or behalf of	TELEPHONE NUMBER	DATE
Felicia Reloba Tilla Chille Defendant	415-522-2000	6/10/07
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO N	OT WRITE BELO	W THIS LINE
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an one USM 283 is submitted) No. 11 No. 11		
nereby certify and return that I 🗌 have personally served , 🗆 have legal evidence of service 🛍 hav	e executed as shown in "Ren	narks", the process described
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I hereby certify and return that I am unable to locate the individual, company, corporation, etc. nam	ed above (See remarks below)	
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NOTICE OF SERVICE
 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO:	Lieutenant Krenke	Civil Action, File Number CV07-04967 PJH (PR)				
	Salinas Valley State Prison P.O. Box 1020	Kevin Burton				
	Soledad, CA 93960-1020	ν.				
		California Department of Corrections, et al				
T	ne enclosed summons and complaint are served pursuant	t to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and	<u>d</u>			
C	alifornia State law.	QAR -1	RCC.			
Y	ou MUST COMPLETE the acknowledgment part of this	s form below, AND RETURN COPIES FAND 2 texthe sen	der			
withi	n 20 days. An envelope has been enclosed for this purp	pose. Keep copy 3 for your records.	;			
Y	OU MUST SIGN AND DATE THE ACKNOWLEDGM	MENT ON ALL COPIES. If you are served on behalf of a) •			
corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must						
	onship to that entity. If you are served on behalf of anoth	ner person and you are authorized to receive process, you m	iust			
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answ	er the complaint within 20 days for private defendants ar	nd/or 60 days for Federal defendants. If you fail to do so,				
Juagn	nent by default will be taken against you for the relief de	emanded in the complaint.				
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Date of	ff Signature	Signature (USMS Official)	-1			
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City	Same and Sap Code	Service of Process 8/05/08				
Signa	ture The state of	Date of Signature	_			

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee

Copy 4 - USMS District Suspense

JSM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Kevin Burton			COURT CAS CV-07-4967		
DEFENDANT			TYPE OF PRO		
California Department of Corrections, et al.				order and Compl	aint
NAME OF INDIVIDUAL, COMPANY, CORI	PORATION, ET	C. TO SERVE OR DES			
SERVE) SCREENT RAMIREZ	· _ ·				UG 1 2
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gnature of Attorney other Originator requesting separce on schall	<i>y</i> / x	PLAINTIFF	FELEPHONE NUMBER	DATE	9,5
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I hereby certify and return that I am unable to locate the indivi	dual, company,	corporation, etc. named	above (See remarks be	low)	
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			Signature of	U.S. Marshal or De	<u>.</u> .
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- 3. NOTICE OF SERVICE
 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Copy 3 - Addressee

Copy 4 - USMS District Suspense



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court for the Northern District of California

TO:	Sergeant Ramirez	Civil Action, File Number CV07-04967 PJH (PR)			
10.	Salinas Valley State Prison	Kevin Burton			
1	P.O. Box 1020	V.			
ľ	Soledad, CA 93960-1020	California Department of Corrections, et al			
L		Cumorina Department of Contouring, of an			
	e enclosed summons and complaint are served pursuant lifornia State law.	to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and			
Yo within	u MUST COMPLETE the acknowledgment part of this 20 days. An envelope has been enclosed for this purp	form below, AND RETURN COPIES TAND 2 to the sender ose. Keep copy 3 for your records.			
corpor relatio	ation, unincorporated association (including a partnersh	MENT ON ALL COPIES. If you are served on behalf of a point of the poin			
behalf		rm to the sender within 20 days, you (or the party on whose unses incurred in serving a summons and complaint in any other			
answe	ou do complete and return copies 1 and 2 of this form, in the complaint within 20 days for private defendants are ent by default will be taken against you for the relief de	you (or the party on whose behalf you are being served) must nd/or 60 days for Federal defendants. If you fail to do so, amanded in the complaint.			
	eclare, under penalty of perjury, that this Notice and Aclailed on this date.	knowledgment of Receipt of Summons and Complaint By Mail			
Daye of	3 fo 8 Signature	for Federico Rochall. S. Marchel Signature (USMS Official) L. Jana Civil Chen			
	ACKNOWLEDGMENT OF RECEIP	T OF SUMMONS AND COMPLAINT			
I de manne		f the summons and of the complaint in the above captioned			
	STATE OF CALIFORNIA	Attorney for Defendant Ramirez			
StreetO	render ort the attacknep. General.	Relationship to Entity/Authority to Receive			
455	DEPARTMENT OF JUSTICE	Mail			
City, S	GOLDEN GATE AVENUE, SUITE 11000	Service of Process			
	7,10,10,2,000	8/05/08			
Signati	He San	Date of Signature			
	- Clerk of Court				
Copy 2	- United States Marshals Service	LISM Form 2			